TRR - Kidney/Pancreas Adult Fields to be completed by members

Form Section	Field Label	Notes
Recipient Information	Organ	Display Only - Cascades from TCR
Recipient Information	Recipient First Name	Display Only - Cascades from TCR
Recipient Information	Recipient Middle Initial	Not required
Recipient Information	Recipient Last Name	Display Only - Cascades from TCR
Recipient Information	SSN	Display Only - Cascades from TCR
Recipient Information	HIC	Display Only - Cascades from TCR
Recipient Information	DOB	Display Only - Cascades from TCR
Recipient Information	Gender	Display Only - Cascades from TCR
Recipient Information	Tx Transplant Date	Display Only - Cascades from Database
Recipient Information	Transplant Time	Display Only - Cascades from Database
Recipient Information	Transplant Time Zone	Display Only - Cascades from Database
Recipient Information	State of Permanent Residence	
Recipient Information	Permanent Zip	D. J. G. J. G. BOD
Provider Information	Recipient Center Code	Display Only - Cascades from TCR
Provider Information	Recipient Center Type	Display Only - Cascades from TCR
Provider Information	Surgeon Name	
Provider Information	NPI#	
Donor Information	UNOS Donor ID #	Display Only - Cascades from feedback
Donor Information	Donor Type	Display Only - Cascades from feedback
Donor Information	OPO	Display Only - Cascades from feedback
Patient Status	Kidney Primary Diagnosis	
Patient Status	Kidney Primary Diagnosis//Specify	
Patient Status Patient Status	Pancreas Primary Diagnosis	
	Pancreas Primary Diagnosis//Specify	
Patient Status	Date: Last Seen, Retransplanted or Death	
Patient Status	Patient Status	
Patient Status	Primary Cause of Death	
Patient Status	Cause of Death//Specify	NT
Patient Status	Contributory Cause of Death	Not required
Patient Status	Contributory Cause of Death//Specify	Not required
Patient Status	Contributory Cause of Death	Not required
Patient Status	Contributory Cause of Death//Specify	Not required
Patient Status	Retransplanted organ	
Patient Status	Date of Admission to Tx Center	N-+ d
Patient Status	Date of Discharge from Tx Center	Not required
Patient Status	Functional Status	
Patient Status Patient Status	Working for income Primary	
Patient Status	Kidney Foreign Government//Specify	
Patient Status	Primary	
Patient Status	Pancreas Foreign Government//Specify	
Pretransplant	Height	
Pretransplant	Height in Centimeters//Status	Value or status is reported, not both
r retransplant	0	value of status is reported, not both
Pretransplant	Height Percentile//Growth Percentiles//%ile	Calculated for display only
Pretransplant	Weight	Calculated for display only
~ ^,	Weight in Kilograms//Status	Value or status is reported, not both
Pretransplant		value of status is reported, not bottl
Pretransplant	Weight Percentile//Growth Percentiles//%ile	Calculated for display only
Pretransplant	BMI	Display Only - Cascades from Database
ı ıcuanspianı	D1411	Disping Only - Cascades Holli Dallabase
Pretransplant	BMI://%ile	Calculated for display only
Pretransplant	Previous Transplant Organ	Display Only - Cascades from Database
Pretransplant	Previous Transplant Organi Previous Transplant Date	Display Only - Cascades from Database
Pretransplant	Previous Transplant Date Previous Transplant Graft Fail Date	Display Only - Cascades from Database
. reaunopiant	Tievious Transpiant Graft Fall Date	Display Only - Cascades Holli Daidbase
Pretransplant	Pretransplant Dialysis	
retunsplant	1 rettunspiant Diarysis	
	If Dialymod Data of Mart Daniel I 1919	
Pretransplant	If Dialyzed, Date of Most Recent Initiation of Chronic Maintenance Dialysis	1
Pretransplant	Date First Dialyzed//Status	Value or status is reported, not both
Pretransplant	Average Daily Insulin Units	varie or status is reported, not bottl
Pretransplant Pretransplant	Average Daily Insulin Units Average Daily Insulin Units//Status	Value or status is reported, not both
Pretransplant Pretransplant	Serum Creatinine at Time of Tx	varue or status is reported, flot both
Pretransplant	Serum Creatinine at Time of Tx//Status	Value or status is reported, not both
ı ıcuanəpidiit	Serum Greathine at Time Of TX//Stallis	varue or status is reported, flot both
Pretransplant	HIV Serostatus	
e o consudill	ווו א טכוטטנמנעט	

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Recipient Information
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Pretransplant	CMV Status	
Pretransplant	HBV Core Antibody	
Pretransplant	HBV Surface Antibody Total	
Pretransplant	HBV Surface Antigen	
Pretransplant	NAT HBV	
Pretransplant	HCV Serostatus	
Pretransplant	NAT HCV	
	EBV Serostatus	
Pretransplant		
_	Did the recipient receive Hepatitis B	
Pretransplant	vaccines prior to transplant?	
Pretransplant	Previous Pregnancies	
	Malignancies between listing and	
Pretransplant	transplant//Specify	
	Malignancies between listing and	
Pretransplant	transplant	
Pretransplant	If yes, specify type	
Transplant Procedure	Multiple Organ Recipient	Display Only - Cascades from feedback
	Were extra vessels used in the transplant	· · · · · · · · · · · · · · · · · · ·
Transplant Procedure	procedure	Display Only - Cascades from feedback
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Transplant Procedure	Drocedure Type	Display Only Cassades from foodback
Transplant Frocedure	Procedure Type	Display Only - Cascades from feedback
Townson law (D)	Conft Diagram	
Transplant Procedure	Graft Placement	
Transplant Procedure	Operative Technique	
Transplant Procedure	Duct Management	
Transplant Procedure	Duct Management//Specify	
Transplant Procedure	Venous Vascular Management	
Transplant Procedure	Arterial Reconstruction	
Transplant Procedure	Arterial Reconstruction//Specify	
Transplant Procedure	Venous Extension Graft	
Transplant Frocedure		
	Total Cold ischemia Time Right KI(OR	
Transplant Dragodyra	EN-BLOC): (if pumped, include pump	
Transplant Procedure	time)	
_ , _ ,		. , , ,
Transplant Procedure	Total Cold Ischemia Time Right KI//Status	Value or status is reported, not both
	Total Cold Ischemia Time Left KI (If	
Transplant Procedure	pumped, include pump time)	
Transplant Procedure	Total Cold Ischemia Time Left KI//Status	Value or status is reported, not both
	Total Pancreas Preservation Time (include	
Transplant Procedure	Cold, Warm, Anastomotic time)	
_		
	Total Pancreas Preservation Time (include	
Transplant Procedure	Cold, Warm, Anastomotic time)//Status	Value or status is reported, not both
Transplant Procedure	Kidney(s) received on	
Transplant Procedure	Received on ice	
	Received on pump	
Transplant Procedure		
Transplant Procedure	Left Kidney Final resistance at transplant	771
Transplant Procedure	Left Kidney Final resistance at tx//Status	Value or status is reported, not both
Transplant Procedure	Right Kidney Final resistance at transplant	
Transplant Procedure	Right Kidney Final resistance at tx//Status	Value or status is reported, not both
Transplant Procedure	Left Kidney Final flow rate at transplant	
	5 1 1 1 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Left Kidney Final flow rate at tx//Status	Value or status is reported, not both
Transplant Procedure	reality _ mai now rate at thi/ otalias	or status is reported, not both
Transplant Procedure		
	Right Kidney Final flow rate at transplant	
	Right Kidney Final flow rate at transplant	
Transplant Procedure Transplant Procedure		Value or ctatic is vaporated b-sh
	Right Kidney Final flow rate at transplant Right Kidney Final flow rate at tx//Status	Value or status is reported, not both
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Transplant Procedure Transplant Procedure Transplant Procedure Transplant Procedure	Right Kidney Final flow rate at tx//Status Organ Check-In Date Check-In Time	·

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Post Transplant	Graft Status	
Post Transplant	Resumed Maintenance Dialysis	
1 OSt Transplant	Resulted Manifellance Dialysis	
Post Transplant	Date Maintenance Dialysis Resumed	
Post Transplant	Date of Graft Failure:	
Post Transplant	Primary Cause of Graft Failure:	
	Primary Cause of Graft Failure//Other,	
Post Transplant	Specify:	
	Did patient have any acute kidney rejection	
Post Transplant	episodes between transplant and discharge	
	Most Recent Serum Creatinine Prior to	
Post Transplant	Discharge	
	Most Recent Serum Creatinine Prior to	
Post Transplant	Discharge//Status	Value or status is reported, not both
Post Transplant	Patient Need Dialysis within First Week	
Post Transplant	Pancreas Graft Status	
	Patient using any method of blood sugar	
Post Transplant	control?	
		New field if pancreas graft status is
		functioning. Modified label if graft status
Post Transplant	Patient on insulin?	is failed
		New field if pancreas graft status is
	L	functioning. Modified label if graft status
Post Transplant	Date insulin resumed	is failed
Post Transplant	Total insulin dosage units	771
Post Transplant	Total insulin dosage units//ST	Value or status is reported, not both
Post Transplant	Insulin duration of use	
D . T . 1 .	T 1: 1 :: 6 :: 40T	771
Post Transplant	Insulin duration of use//ST	Value or status is reported, not both
	L	New field if pancreas graft status is
D+ Tl+	Patient on oral medication to control blood	
Post Transplant	sugar	is failed
		New field if pancreas graft status is
D+ Tl+	Data and madications manned	functioning. Modified label if graft status
Post Transplant	Date oral medications resumed	is failed
		New field if pancreas graft status is
Doct Transplant	Datient using diet to central blood sugar	functioning. Modified label if graft status
Post Transplant	Patient using diet to control blood sugar	is failed
Post Transplant	Pancreas Date of Graft Failure	
Post Transplant	C-Peptide Value	
Post Transplant	C-Peptide Value://ST=	Value or status is reported, not both
1 Ost 11tilispitalit	G-1 cpuac value.//51	variate of status is reported, not both
Post Transplant	Hba1c (%)	
Post Transplant	Hba1c (%)//Status	Value or status is reported, not both
·		
Post Transplant	Pancreas Primary Cause of Graft Failure	
	Pancreas Primary Cause of Graft	
Post Transplant	Failure/Specify	
Post Transplant	Pancreas Graft/Vascular Thrombosis	
Post Transplant	Pancreas Infection	
Post Transplant	Bleeding	
Post Transplant	Anastomotic Leak	
Post Transplant	Hyperacute Rejection	
Post Transplant	Pancreas Acute Rejection	
Post Transplant	Biopsy Proven Isletitis	
Post Transplant	Pancreatitis	
Post Transplant	Other, Specify	
	Did patient have any acute pancreas	
	rejection episodes between transplant and	
Post Transplant	discharge	
Post Transplant	Pancreatitis	

Transplant Procedure Transplant Procedure
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Post Transplant	Anastomotic Leak	
Post Transplant	Abscess or Local Infection	
Post Transplant	Other	Not required
Post Transplant	Weight Post Transplant	
Post Transplant	Weight in Kilograms//Status	Value or status is reported, not both
Immunosuppression Other	Are any medications given currently for maintenance or anti-rejection	
Immunosuppression Other	Immunosuppression medication	
Immunosuppression Other	Immunosuppression medication indication	
Immunosuppression Other	Days of induction	

OMB No. 0915-0157 Expiration Date: XX/XX/20XX

PUBLIC BURDEN STATEMENT:

The private, non-profit Organ Procurement and Transplantation Network (OPTN) collects this information in order to perform the following OPTN functions: to assess whether applicants meet OPTN Bylaw requirements for membership in the OPTN; and to monitor compliance of member organizations with OPTN Obligations. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0915-0157 and it is valid until XX/XX/202X. This information collection is required to obtain or retain a benefit per 42 CFR §121.11(b)(2). All data collected will be subject to Privacy Act protection (Privacy Act System of Records #09-15-0055). Data collected by the private non-profit OPTN also are well protected by a number of the Contractor's security features. The Contractor's security system meets or exceeds the requirements as prescribed by OMB Circular A-130, Appendix III, Security of Federal Automated Information Systems, and the Departments Automated Information Systems Security Program Handbook. The public reporting burden for this collection of information is estimated to average 0.27 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.

Post Transplant
Post Transplant
Post Transplant
Post Transplant
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Immunosuppression Other
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OMB No. 0915-0157 Expiration Date: XX/X)

PUBLIC BURDEN STATEMENT:

The private, non-profit Organ Pr perform the following OPTN fun the OPTN; and to monitor comp sponsor, and a person is not req control number. The OMB contr information collection is require Privacy Act protection (Privacy & well protected by a number of tl requirements as prescribed by C the Departments Automated Inf collection of information is estin searching existing data sources, burden estimate or any other as HRSA Reports Clearance Officer,

TRR - Kidney/Pancreas Pediatric Fields to be completed by members

Field Label	Notes
Organ	Display Only - Cascades from TCR
Recipient First Name	Display Only - Cascades from TCR
Recipient Middle Initial	Not required
Recipient Last Name	Display Only - Cascades from TCR
SSN	Display Only - Cascades from TCR
HIC	Display Only - Cascades from TCR
DOB	Display Only - Cascades from TCR
Gender	Display Only - Cascades from TCR
Tx Transplant Date	Display Only - Cascades from Database
Transplant Time	Display Only - Cascades from Database
Transplant Time Zone	Display Only - Cascades from Database
State of Permanent Residence	1 3
Permanent Zip	
Recipient Center Code	Display Only - Cascades from TCR
Recipient Center Type	Display Only - Cascades from TCR
Surgeon Name	- F
NPI#	
UNOS Donor ID #	Display Only - Cascades from feedback
Donor Type	Display Only - Cascades from feedback
OPO	Display Only - Cascades from feedback
Kidney Primary Diagnosis	. 5 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Kidney Primary Diagnosis//Specify	
Pancreas Primary Diagnosis	
Pancreas Primary Diagnosis//Specify	
Date: Last Seen, Retransplanted or Death	
Patient Status	
Primary Cause of Death	
Cause of Death//Specify	
Contributory Cause of Death	Not required
Contributory Cause of Death//Specify	Not required
Contributory Cause of Death	Not required
Contributory Cause of Death//Specify	Not required
Retransplanted organ	rocrequired
Date of Admission to Tx Center	
Date of Discharge from Tx Center	Not required
Functional Status	
Cognitive Development	
Motor Development	
Academic Progress	
Academic Activity Level	
Primary	
Kidney Foreign Government//Specify	
Primary	
11111111	
Pancreas Foreign Government//Specify	
Date of Measurement	
Height Measurement Date	
rieight ivicusurement Bute	
Height	
Height in Centimeters//Status	Value or status is reported, not both
*	talac of status is reported, not both
Height Percentile//Growth Percentiles//%ile	Calculated for display only
Weight Measurement Date	Calculated for display only
Weight	
Weight in Kilograms//Status	Value or status is reported, not both
	value of status is reported, not both
Weight Percentile//Growth Percentiles//%ile	Calculated for display only
reicentnes///one	Calculated for display only
DMI	Display Only Consider 6 Deci
BMI BMI://9/ile	Display Only - Cascades from Database
BMI://%ile	Calculated for display only
Previous Transplant Organ	Display Only - Cascades from Database
Previous Transplant Date	Display Only - Cascades from Database
Previous Transplant Graft Fail Date	Display Only - Cascades from Database
Pretransplant Dialysis	
	1
If Dialyzed, Date of Most Recent Initiation of Chronic Maintenance Dialysis Date First Dialyzed//Status	Value or status is reported, not both

Serum Creatinine at Time of Tx	us is reported, not both
Serum Creatinine at Time of Tx Serum Creatinine at Time of Tx//Status HIV Serostatus NAT HIV CMV Status HBV Core Antibody HBV Surface Antibody Total	us is reported, not both
Serum Creatinine at Time of Tx//Status HIV Serostatus NAT HIV CMV Status HBV Core Antibody HBV Surface Antibody Total	
HIV Serostatus NAT HIV CMV Status HBV Core Antibody HBV Surface Antibody Total	us is reported, not both
CMV Status HBV Core Antibody HBV Surface Antibody Total	
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HBV Surface Antigen	
NAT HBV	
HCV Serostatus	
NAT HCV	
EBV Serostatus	
Did the recipient receive Hepatitis B	
vaccines prior to transplant?	
Malignancies between listing and	
transplant//Specify Malignancies between listing and	
Malignancies between listing and transplant	
If yes, specify type	
Fracture in the past year (or since last	
follow-up)	
Spine-compression fracture	
Spine-compression fracture//# of fractures	
Extremity	
Extremity//# of fractures	
Other	
Other	
Other//# of fractures	
AVN (avascular necrosis)	
Multiple Organ Recipient Display Only	- Cascades from feedback
Were extra vessels used in the transplant	
procedure Display Only	 Cascades from feedback
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Procedure Type Display Only	- Cascades from feedback
Procedure Type Display Only Operative Technique	7 - Cascades from feedback
Procedure Type Display Only Operative Technique Duct Management	r - Cascades from feedback
Procedure Type Display Only Operative Technique Duct Management Duct Management//Specify	v - Cascades from feedback
Procedure Type Display Only Operative Technique Duct Management	v - Cascades from feedback
Procedure Type Display Only Operative Technique Duct Management Duct Management//Specify Venous Vascular Management	- Cascades from feedback
Procedure Type Display Only Operative Technique Duct Management Duct Management//Specify Venous Vascular Management	- Cascades from feedback
Procedure Type Operative Technique Duct Management Duct Management/Specify Venous Vascular Management Arterial Reconstruction Arterial Reconstruction//Specify	- Cascades from feedback
Procedure Type Display Only Operative Technique Duct Management Duct Management/Specify Venous Vascular Management Arterial Reconstruction	- Cascades from feedback
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Procedure Type Display Only Operative Technique Duct Management Duct Management/Specify Venous Vascular Management Arterial Reconstruction Arterial Reconstruction//Specify Venous Extension Graft Total Cold ischemia Time Right KI(OR EN-BLOC): (if pumped, include pump	- Cascades from feedback
Procedure Type Operative Technique Duct Management Duct Management/Specify Venous Vascular Management Arterial Reconstruction Arterial Reconstruction//Specify Venous Extension Graft Total Cold ischemia Time Right KI(OR EN-BLOC): (if pumped, include pumptime)	- Cascades from feedback
Procedure Type Operative Technique Duct Management Duct Management/Specify Venous Vascular Management Arterial Reconstruction Arterial Reconstruction//Specify Venous Extension Graft Total Cold ischemia Time Right KI(OR EN-BLOC): (if pumped, include pump time) Total Cold Ischemia Time Right	
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Procedure Type Operative Technique Duct Management Duct Management Duct Management/Specify Venous Vascular Management Arterial Reconstruction Arterial Reconstruction Arterial Reconstruction//Specify Venous Extension Graft Total Cold ischemia Time Right KI(OR EN-BLOC): (if pumped, include pump time) Total Cold Ischemia Time Right KI//Status Value or stat Total Cold Ischemia Time Left KI (If	
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Procedure Type Operative Technique Duct Management Duct Management/Specify Venous Vascular Management Arterial Reconstruction Arterial Reconstruction Arterial Reconstruction//Specify Venous Extension Graft Total Cold ischemia Time Right KI(OR EN-BLOC): (if pumped, include pump time) Total Cold Ischemia Time Right KI(If pumped, include pump time) Total Cold Ischemia Time Left KI (If pumped, include pump time) Total Cold Ischemia Time Left KI (If pumped, include pump time)	us is reported, not both
Procedure Type Operative Technique Duct Management Duct Management Duct Management/Specify Venous Vascular Management Arterial Reconstruction Arterial Reconstruction//Specify Venous Extension Graft Total Cold ischemia Time Right KI(OR EN-BLOC): (if pumped, include pump time) Total Cold Ischemia Time Right KI//Status Value or stat Total Cold Ischemia Time Left KI (If pumped, include pump time) Total Cold Ischemia Time Left KI//Status Total Pancreas Preservation Time (include Cold, Warm, Anastomotic time)	us is reported, not both
Procedure Type Operative Technique Duct Management Duct Management Duct Management Venous Vascular Management Arterial Reconstruction Arterial Reconstruction Arterial Reconstruction//Specify Venous Extension Graft Total Cold ischemia Time Right KI(OR EN-BLOC): (if pumped, include pumptime) Total Cold Ischemia Time Right KI//Status Total Cold Ischemia Time Left KI (If pumped, include pump time) Total Cold Ischemia Time Left KI//Status Total Cold Ischemia Time Left KI//Status Total Pancreas Preservation Time (include Cold, Warm, Anastomotic time) Total Pancreas Preservation Time (include	us is reported, not both
Procedure Type Operative Technique Duct Management Duct Management Duct Management Venous Vascular Management Arterial Reconstruction Arterial Reconstruction Arterial Reconstruction//Specify Venous Extension Graft Total Cold ischemia Time Right KI(OR EN-BLOC): (if pumped, include pumptime) Total Cold Ischemia Time Right KI//Status Total Cold Ischemia Time Left KI (If pumped, include pump time) Total Cold Ischemia Time Left KI//Status Total Cold Ischemia Time Left KI//Status Total Pancreas Preservation Time (include Cold, Warm, Anastomotic time) Total Pancreas Preservation Time (include	us is reported, not both us is reported, not both
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Procedure Type Operative Technique Duct Management Duct Management Duct Management/Specify Venous Vascular Management Arterial Reconstruction Arterial Reconstruction/Specify Venous Extension Graft Total Cold ischemia Time Right KI(OR EN-BLOC): (if pumped, include pumptime) Total Cold Ischemia Time Right KI/Status Total Cold Ischemia Time Left KI (If pumped, include pumptime) Total Cold Ischemia Time Left KI (If pumped, include pumptime) Total Cold Ischemia Time Left KI//Status Total Pancreas Preservation Time (include Cold, Warm, Anastomotic time) Total Pancreas Preservation Time (include Cold, Warm, Anastomotic time)//Status Value or stat	us is reported, not both us is reported, not both

TOWN TO LEAD AND A STATE OF THE	
Left Kidney Final resistance at transplant Left Kidney Final resistance at tx//Status	Value or status is reported, not both
Determine I mai resistance at two status	value of states is reported, not both
Right Kidney Final resistance at transplant	
Right Kidney Final resistance at tx//Status Left Kidney Final flow rate at transplant	Value or status is reported, not both
Left Kidney Final flow rate at tx//Status	Value or status is reported, not both
Right Kidney Final flow rate at transplant	
Right Kidney Final flow rate at tx//Status	Value or status is reported, not both
Organ Check-In Date	
Check-In Time Check-In Time Zone	Displace Only Colorlated
TransNet Organ Check-In Times for	Display Only - Calculated
Related Organs	Display Only - Cascades from Database
Graft Status	
Resumed Maintenance Dialysis	
Date Maintenance Dialysis Resumed	
Date of Graft Failure: Primary Cause of Graft Failure:	
Primary Cause of Graft Failure//Other,	
Specify:	
Did patient have any acute kidney rejection episodes between transplant and discharge	
Is growth hormone therapy used between listing and transplant	
Most Recent Serum Creatinine Prior to Discharge	
Most Recent Serum Creatinine Prior to Discharge//Status Patient Need Dialysis within First Week	Value or status is reported, not both
Pancreas Graft Status	
Patient using any method of blood sugar control?	
Patient on insulin?	New field if pancreas graft status is functioning, Modified label if graft status is failed
Date insulin resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed
Total inculin docago write	
Total insulin dosage units Total insulin dosage units//ST	Value or status is reported, not both
Insulin duration of use	, , , , , , , , , , , , , , , , , , , ,
Insulin duration of use//ST	Value or status is reported, not both
Patient on oral medication to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed
Date oral medications resumed	New field if pancreas graft status is functioning. Modified label if graft status is failed
Patient using diet to control blood sugar	New field if pancreas graft status is functioning. Modified label if graft status is failed
Pancreas Date of Graft Failure	
C-Peptide Value C-Peptide Value://ST=	Value or status is reported, not both
C-1 epilue value.//31-	variet or status is reported, flot botti
Hba1c (%)	Walus an atomic 2 2 2 2
Hba1c (%)//Status	Value or status is reported, not both

Pancreas Primary Cause of Graft Failure	
Pancreas Primary Cause of Graft	
Failure/Specify	
Pancreas Graft/Vascular Thrombosis	
Pancreas Infection	
Bleeding	
Anastomotic Leak	
Hyperacute Rejection	
Pancreas Acute Rejection	
Biopsy Proven Isletitis	
Pancreatitis	
Other, Specify	
Did patient have any acute pancreas	
rejection episodes between transplant and	
discharge	
Pancreatitis	
Anastomotic Leak	
Abscess or Local Infection	
Other	Not required
Weight Post Transplant	
Weight in Kilograms//Status	Value or status is reported, not both
Are any medications given currently for	
maintenance or anti-rejection	
Immunosuppression medication	
Immunosuppression medication indication	
Days of induction	

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ocurement and Transplantation Network (OPTN) collects this information in order to ctions: to assess whether applicants meet OPTN Bylaw requirements for membership in liance of member organizations with OPTN Obligations. An agency may not conduct or uired to respond to, a collection of information unless it displays a currently valid OMB ol number for this information collection is 0915-0157 and it is valid until XXXX/202X. This d to obtain or retain a benefit per 42 CFR §12.11(b)[2). All data collected will be subject to vct System of Records #09-15-0055). Data collected by the private non-profit OPTN also are he Contractor's security features. The Contractor's security system meets or exceeds the MBB Circular A-130, Appendix III, Security of Federal Automated Information Systems, and formation Systems Security Program Handbook. The public reporting burden for this nated to average 0.27 hours per response, including the time for reviewing instructions, and completing and reviewing the collection of information. Send comments regarding this spect of this collection of information, including suggestions for reducing this burden, to 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.